U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only	1
	Recid Cy	
E	SUN 2 1 2005	

1. File Number U - 01957

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 1 / 2001 Through: 12 / 31 / 2001
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Richard Rumelt	Name UNITE
	Labor Organization File Number 000-381
P.O. Box, Bldg., Room No., if any 14th Floor	P.O. Box, Building and Room Number, if any 10th Floor
T-FILE FOOT	
Street 275 Seventh Avenue	Street 275 Seventh Avenue
City New York	City New York
State New York ZIP Code + 4 10001	State New York ZIP Code + 4 10001
5. Position in labor organization. Vice President	
nonetary value from an employer whose employees your organizatio	n represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
A. Held an interest in, engaged in transactions (including loans) with, or dimonetary value from an employer whose employees your organization	n represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.3. Nature of interest, fransaction, of income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	
State ZIP Code + 4	
Signatu	re
15. Signature and verification. The undersigned declares, under penalty of Persubmitted in this report (including the information contained in any accompanying undersigned's knowledge and belief, true, correct, and complete. (See the section	documents), has been examined by the signatory and is, to the best of the
Signed Jell S	on 4-26-05 212-730-75004-925
	Date Telephone Number

File Number U- 01957 Name of Person Filing Richard Rumelt B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Amalgamated Bank a. Labor Organization Trade Name, if any: P.O. Box, Bldg., Room No., if any c. Employer 15 Union Square New York New York ZIP Code + 4 State 11,a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Cost of Share Price Per Share Name Amalgaated Bank \$9,950 P.O. Box, Bldg., Room No., if any street 15 Union Square 11.b. Approximate dollar value of such dealing. New York 12.a. Nature of interest held or income received ZIP Code + 4 10003 \$7,500.00 in fees State New York \$1,191.00 in dividends 8,691 C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street ZIP Code + 4 State 14.b. Amount of payment. 13.b. Is the Business an Employer or Consultant Form LM-30 (2003)